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APPLICANTS

NingJun Sun, Chino, CA;

**** CONTINUING DATA *******

**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** * SMALL ENTITY ***
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Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		CA	4	5	1
Verified and Acknowledged	JASON K LIN/ Examiner's Signature	Initials				

ADDRESS

LAW OFFICES OF J.F. LEE
17800 CASTLETON STREET
SUITE 383
CITY OF INDUSTRY, CA 91748
UNITED STATES

TITLE

High-spectrum radio frequency wireless transmission and control system for audio/video equipment

FILING FEE RECEIVED 385	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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